Testimony before the

Subcommittee on Employment and Workplace Safety

Committee on Health, Education, Labor and Pensions

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Middletown, Connecticut

In Support of The Nurse Practitioner Residency and Fellowship Training Program (NPRFTP)

The Future Primary Care Workforce is Nurse Practitioners

Good Morning Chairman Hickenlooper, and Members of the Senate Health, Education, Labor and Pensions Employment Subcommittee. Thank you for the opportunity to speak to this Committee.

We need to ensure that every person and every family in every community has the opportunity to get high quality primary care. Thus, we have a vital need to ensure that we are training the next generation of primary care providers to make that possible. Today, I will speak not just to the need, but to what is being done to meet that need. I am going to focus primarily today on primary care providers and the primary care setting but my comments are also relevant to psychiatric/mental health care and specialty care.

We know the United States has an urgent short and long term need for expert primary care providers. The National Academy of Sciences, Engineering and Medicine's landmark 2021 report, Achieving High Quality Primary Care, (Phillips et al., 2021) has laid out a blueprint of what must be done to achieve high quality primary care for all people but it does this against a backdrop of a projected shortage of 130,000 physicians. (Zhang et al., 2020) This comes at a time when the healthcare needs of the population have never been more intense due to an aging population, the burden of chronic illnesses, and persistent health disparities by race, income and ethnicity. And of course, COVID has left its mark everywhere.

Where will the next generation of primary care providers come from? I answer: they are already here. They are nurse practitioners. But we have to give them the opportunity to train and prepare for practice and settings in which they are the bedrock, core, and foundation of primary care in the U.S.

Nothing is static in life or health care. Fifteen years ago, based on research and decades of experience, I recognized that it was time for a major innovation in training for NPs committed to being primary care providers, particularly in community health centers and rural and underserved areas. We needed them to be ready and able to embrace the full scope of primary care practice when they entered practice right from the start. We saw firsthand the "shock and awe", as one new NP described it, at just how sick the patients are, and how complex the

care is. While all new NPs are prepared and competent for entry level practice, we recognized that there are few "entry level" patients in our very busy and stressed underserved communities and settings. This gap quickly gives rise to burnout and frustration. Too often we witnessed early departure of nurse practitioners from the very settings that needed them the most. The solution we proposed was formal postgraduate residency or fellowship training. This intensive yearlong training in the practice setting gives new NPs the opportunity to develop the confidence, competence, and mastery to undertake full scope practice in settings both rural and urban, and to embrace the full range of primary care services.

In 2007, my colleagues and I designed and launched the first postgraduate residency program to support this level of intensive hands-on NP preparation at Community Health Center, Inc. (Flinter, 2011) We did it with 4 NP residents and a commitment to designing a model that could be replicated nationally. Today, there are 250 postgraduate NP residency and fellowship training programs specializing in primary care in the U.S. Seventy five are sponsored by FQHCs and an additional twenty six are sponsored by academic partners but carried out in an FQHC. The programs are carefully constructed to ensure progressive, intensive clinical training with expert preceptors, development of mastery in caring for highly challenging conditions such as substance use disorder, HIV, multiple chronic illnesses, and all intertwined with adverse social determinants of health and all while promoting wellness, prevention, and health promotion. The NP Residents are trained in the science of improving practice as well as delivering care. The programs provide the experience and skills for new NPs to practice as part of a high performing team, which leverages the contributions of medical assistants, RNs, behavioral health clinicians and, increasingly, community health workers.

What started as a model has grown into a movement because it works. Research indicates that graduates of postgraduate training programs remain in primary care and underserved practices at high rates compared to national averages. In a nationally representative study conducted last year, primary care NPs with residency training were also more likely to mirror their patient populations (were more diverse) and also saw more underserved populations (minority populations with limited English proficiency. (Park et al., 2022)

An initial concern of some that the creation of postgraduate training implied that NPs were somehow lacking has given way to recognition that this is what new NPs want and deserve. In a recent national survey, 77.5% of newly graduated NPs reported they were either "willing" or "very willing" to participate in a postgraduate training program. (Faraz, 2015) We are asking them to be the backbone of primary care, and they deserve the opportunity to choose intensive postgraduate primary care training, appropriate in length and content to today's primary care practice models.

Pragmatically, the model addresses the most urgent need for primary care organizations: recruiting and retaining an expert primary care workforce. Today, we recognize that this must include training psychiatric/mental health NPs as a vital part of the primary care team to address behavioral health and substance use disorders. Many of the original NP Residency programs are expanding to include tracts for psychiatric/mental health NPs. And while today's testimony is focused on primary care, I want to stress that our colleagues in in-patient and specialty outpatient settings have identified the same needs, and concluded that postgraduate residency and fellowship training is essential for new NPs and PAs in their settings as well.

In 2019, HRSA's Bureau of Health Workforce recognized the value and impact of postgraduate training for new NPs with a new program, ANE-NPR, and funded a combination of 36 new and established programs. HRSA added requirements that programs seek and obtain accreditation, and also establish academic practice partnerships. It subsequently received modest appropriations in 2019 and 2020 to further support the program. In 2020-2021, 368 NP residents were supported by the program according to HRSA's data warehouse.

The National Nurse Practitioner Residency and Fellowship Training Consortium (NNPRFTC or simply, "the Consortium") was created to ensure quality and rigor in postgraduate NP training through formal accreditation. It has earned recognition by the U.S. Department of Education as a federally recognized accrediting organization. The Consortium also works with new and existing programs to design their programs from the start using accreditation standards to provide a roadmap to a rigorous, successful program.

How much impact can we have on the goal of ensuring that every person and every family have access to great primary care and a primary care provider? The Consortium's accredited programs plus a group of programs with whom CHC has formally collaborated can document 550 alumni. With 250 programs nationally and a conservative estimate of four postgraduate trainees per program, we can assume up to 1,000 new NPs may now be able to choose a program—far more than just a few years ago, but far less than is needed. We are able to track where alumni of the Consortium's accredited programs practice upon completion of the program. The vast majority are practicing as primary care providers, mostly in community health centers and underserved areas. We need to continue to support the currently funded programs, expand access to new programs, and support those that have devoted scarce resources to standing up a program on their own.

In my work with the Consortium, I have visited many programs: from the Yakima Valley Farmworkers Clinic and CHAS in the state of Washington, to Cahaba Medical Care in Alabama, from Waianae Coast Comprehensive Health Center in Hawaii to Thundermist Health Center in Rhode Island and many points in between. I am deeply impressed by the top to bottom commitment of boards, executive leadership, and front line clinicians and staff to this model because it addresses and resolves much of their highest priority: Recruiting and retaining expert primary care providers who are deeply committed to their practice and communities. Thank you.

Margaret Flinter, APRN, PhD, c-FNP, FAAN, FAANP

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Chairperson, National Nurse Practitioner Residency and Fellowship Training Consortium (NNPRFTC)

References

- Faraz, A. (2015). Factors influencing the successful transition and turnover intention of novice nurse practitioners in the primary care workforce. (Publication No. 3663512) [Doctoral Dissertation, Yale University]. ProQuest Dissertations Publishing.
- Flinter, M. (2011). From new nurse practitioner to primary care provider: Bridging the Transition through FQHC-based residency training. *OJIN: The Online Journal of Issues in Nursing, 17*(1).
- Park, J., Covelli, A. F., & Pittman, P. (2022). Effects of completing a postgraduate residency or fellowship program on primary care nurse practitioners' transition to practice. *Journal of the American Association of Nurse Practitioners*, *34*(1), 32-41.
- Phillips, R. L., McCauley, L. A., & Koller, C. F. (2021). Implementing high-quality primary care: A report from the National Academies of Sciences, Engineering, and Medicine. *JAMA*, *325*(24), 2437-2438.
- Zhang, X., Lin, D., Pforsich, H., & Lin, V. W. (2020). Physician workforce in the United States of America: Forecasting nationwide shortages. *Human Resources for Health, 18*(1), 1-9.

<u>See program map on page 2.</u>

Primary Care and Psychiatric Mental Health NP and NP/PA Postgraduate Residency and Fellowship Training Programs Across the Country

Postgraduate Nurse Practitioner Training Program Sites

Nurse Practitioner (NP) Postgraduate Training Programs

ARIZONA

- El Rio Health Center, Tuscon
- Marana Health Center, Marana

- Cahaba Medical Care Foundation, Centreville
- Cahaba Medical Care Foundation, Birmingham
- Samford University, Birmingham
- University of South Alabama, Mobile

CALIFORNIA

- Asian Health Services, Oakland
- Avenal Community Health Center, Lemoore
- <u>California Correctional Health Care Services (CCHCS)</u>, Elk Grove
- Chin Family Institute for Nursing, Los Angeles
- Clinicas de Salud del Pueblo, Brawley
- Glide Health Services and UCSF/UCLA NP Residency*, San Francisco
- Health Right 360 (Lyon Martin Health Services), San Francisco
- Hill Country Community Clinic, Redding
- Lifelong Medical Care, Berkeley
- Open Door Community Health Center, Arcata
- Petaluma Health Center, Inc., Petaluma
- Santa Rosa Community Health Centers, Santa Rosa
- Shasta Community Health Center, Redding
- Stanford Healthcare, Stanford
- University of California Davis, Davis
- University of California Irvine Family Nurse Practitioner Fellowship Program, Irvine

COLORADO

<u>Peak Vista Community Health Centers</u>, Colorado Springs

CONNECTICUT

Community Health Center, Inc., Middletown

DELAWARE

• Christiana Care, Wilmington

FLORIDA

- Baycare Health System, South Bay
- West Kendall Baptist Hospital, Miami

• Waianae Coast Comprehensive Health Center, Waianae

GEORGIA

Emory University, Atlanta

- Cook County Health, Chicago
- Erie Family Health Center, Inc., Chicago
- Esperanza Health Centers, Chicago
- Heartland International Health Centers, Chicago
- Howard Brown Health, Chicago
- OSF Healthcare, Peoria

INDIANA

- HealthLinc, Valparaiso
- Indiana University Health, Indianapolis
- Riggs Community Health Center, Inc., Lafayette
- University of Southern Indiana, Evansville

- Pittsburg State University, Pittsburg
- University of Kansas Medical Center Research Institute, Fairway

Penobscot Community Health Care, Bangor

MASSACHUSETTS

- Baystate High Street Health Center, Springfield
- Bay State Health, Springfield
- Caring Health Center, Springfield
- Codman Square Community Health Center, Dorchester
- East Boston Neighborhood Health Center Corporation, East Boston
- Edward M. Kennedy Health Center, Springfield
- Family Health Center of Worcester, Worchester
- Harbor Health, Mattapan
- Holyoke Health Center, Holyoke
- Northshore Community Health Center, Salem
- Reliant Medical Group, Leominster

MICHIGAN

• Regents of the University of Michigan, Ann Arbor

MINNESOTA

• Health Partners Institute, Minneapolis

◆ • North Mississippi Medical Center Clinic, Tupelo

(Continued on next page)

◆ Accredited by the NNPRFTC | *Program not currently active. | Page 1; Updated 01/28/22.

Postgraduate Nurse Practitioner Training Program Sites (Continued)

MISSOURI

• Saint Luke's Health System, Kansas City

NEBRASKA

University of Nebraska Medical Center College of Nursing, Lincoln

NEW HAMPSHIRE

Lamprey Health Care, Newmarket

NEW JERSEY

- Hackensack Meridian Health Hospitals Corporation, Hackensack
- Henry Austin Health Center, Trenton

NEW MEXICO

Presbyterian Healthcare Services, Albuquerque

NEW YORK

- Callen-Lorde, New York
- Community Healthcare Network, New York
- Highland Family Medicine, Rochester
- HRHCare Jeannette J. Phillips Health Center at Peekskill*, Peekskill
- Morris Heights Health Center*, Bronx
- Rochester Regional Health, Rochester
- Stony Brook University Hospital PMHNP Residency Program, Stony Brook
- The Institute of Family Health, Bronx
- The Jewish Board, New York
- The Mary Imogene Bassett Hospital, Cooperstown
- United Medical Group/United Health Services, New York
- Urban Health, Bronx
- Wyckoff Heights Medical Center, Brooklyn

NORTH CAROLINA

- The Center for Advanced Practice—Atrium Health, Charlotte
- University of North Carolina Chapel Hill, Chapel Hill
- Western North Carolina Community Health Services*, Asheville

NORTH DAKOTA

North Dakota State University, Fargo

OHIO

- Mount Carmel Health System Foundation, Columbus
- Nationwide Children's Hospital, Columbus

OREGON

- **PeaceHealth**, Eugene
- Yakima Valley Farm Workers Clinic, Salem

PENNSYLVANIA

- Allegheny-Singer Research Institute, Pittsburgh
- Lancaster Health Center, Lancaster
- Pittsburgh Medical Center, Pittsburgh
- Puentes de Salud, Philadelphia

RHODE ISLAND

- Providence Community Health Center, Providence
- Thundermist Health Center, Woonsocket

SOUTH CAROLINA

- Lexington Medical Center, West Columbia
- Spartanburg Regional Healthcare System, Spartanburg

TENNESSEE

- <u>East Tennessee State University</u>, Johnson City
- Johnson City Community Health Center, Johnson City
- Vanderbilt University, Nashville

TEXAS

- Asian American Health, Houston
- CommUnityCare and the University of Texas at Austin School of Nursing*, Austin

• Bon Secours Richmond Health System, Midlothian

WASHINGTON

- CHAS Health, Spokane
 - Columbia Basin Health Association*, Othello
 - Community Health Care, Tacoma
- Harbor Medical Group (HMG)–UW Premera RNHI ARNP Fellowship, Aberdeen
- International Community Health Services, Seattle
 - Peninsula Community Health Services, Bremerton
 - Primary Care Advanced Practice Fellowship—MultiCare Health System, Puyallup
- Sea Mar Community Health Centers, Seattle
- Seattle Children's Hospital, Seattle
- The Everett Clinic, Everett
- Valley View Health Center (VVHC)-UW Premera RNHI ARNP Fellowship, Chehalis
- Yakima Valley Farm Workers Clinic*, Yakima

WASHINGTON, D.C.

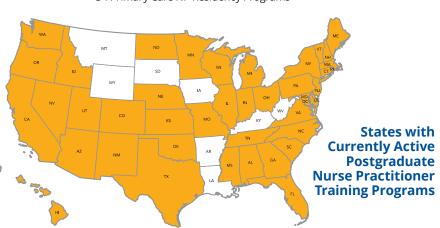
• Unity Health Care, Washington, D.C.

WISCONSIN

• The Medical College of Wisconsin, Milwaukee

U.S. Department of Veterans Affairs Office of Academic Affiliations 2021-2022 NP **Residency Programs:**

- 25 Psychiatric Mental Health NP Residency Programs
- 34 Primary Care NP Residency Programs



◆ Accredited by the NNPRFTC | *Program not currently active. | Page 2; Updated 01/28/22.

2021-2022	IDAHOKENTUCKY	FNP: Bethesda Community Clinic, Canton FNP: Heritage Health, Coeur d'alene FNP: Cumberland Family Medical Center, Inc., Russell Springs FNP: LSU Health-New Orleans School of Nursing, New Orleans FNP: Greater Portland Health, South Portland FNP: Harbor Care, Nashua FNP: Ryan Health, New York FNP: CVHS Health Services, New Canton FNP: HealthPoint, Renton FNP: Community of Hope, Washington, D.C.; Unity Health Care, Washington, D.C.
2020-2021	INDIANAMARYLANDMASSACHUSETTSNEW YORK	 FNP: Hill Country Clinic, Round Mountain FNP: Community Health Net Inc., Gary FNP: CCI Health & Wellness Services, Silver Springs FNP: Caring Health Center, Springfield FNP: NYC Health and Hospitals, New York; Oak Orchard CHC, Brockport FNP: Mutnomah County Community Health Center, Portland; Oregon Washington Health Network, Pendleton
2019-2020	CALIFORNIA MAINE	 FNP: Marana Health Center, Marana FNP: UCI Family Health, Santa Ana; La Maestra Family Clinic, Inc., San Diego FNP: Penobscot Community Health Care, Bangor FNP: Jordan Valley Community Health Center, Springfield FNP: Hudson Headwaters Health Network, Queensbury; The Chautauqua Center, Dunkirk FNP: Crossroad Health Center, Cincinnati FNP: Community of Hope, Washington, D.C. FNP: Cabin Creek Health System, Charleston; Family Care Health Centers, Scott Depot
2018-2019	CALIFORNIA COLORADO MASSACHUSETTS NEW YORK TEXAS WASHINGTON	FNP: El Rio Health Center, Tucson PMHNP: Santa Rosa Community Health, Santa Rosa PMHNP: Peak Vista Community Health Center, Colorado Springs FNP: Codman Square Health Center, Dorchester; Harbor Health Services, Mattapan FNP: Care for the Homeless, New York; Morris Heights Health Center, Bronx; Urban Health Plan, Bronx PMHNP: The Jewish Board, New York FNP: Asian American Health Coalition, Houston PMHNP: Peninsula Health, Bremerton FNP: Unity Health Care, Washington, D.C.
2017–2018	MASSACHUSETTSNEW JERSEYNEW YORKNORTH CAROLINAOHIO	. FNP: Clinica Sierra Vista, Bakersfield; Clinicas de Salud del Pueblo, Inc., Brawley; County of Santa Cruz, Santa Cruz; Salud Para La Gente, Watsonville . FNP: Charles River Community Health, Brighton; Holyoke Health Center, Holyoke . FNP: Henry J. Austin Health Center, Trenton . FNP: Callen-Lorde, New York . FNP: Mountain Area Health Education Center (MAHEC), Ashville . PMHNP: Nationwide Children's Hospital, Columbus . FNP and PMHNP: Public Health Management Corporation (PHMC), Philadelphia FNP: SouthEast Lancaster Health Services, Inc., Lancaster
2016–2017	COLORADO NEW HAMPSHIRE NEW JERSEY OREGON TENNESSEE	. FNP: Avenal Community Health Center, Lemoore; The Children's Clinic-Long Beach, Long Beach; Health Right 360 (Lyon Martin Health Services), San Francisco; Petaluma Health Center, Inc., Petaluma . FNP: Montbello Health Center, Denver . FNP: Lamprey Health Care, Newmarket . FNP: Rutgers Community Health Center, Newark . FNP: Central City Concern Old Town Clinic, Portland . FNP: Johnson City Community Health Center, Johnson City . FNP: CHAS Health, Spokane

HRSA ANE-NPR Grant Awardee Sites

ALABAMA	Cahaba Medical Care Foundation; Samford University; University of South Alabama
ARIZONA	El Rio Health Center
CALIFORNIA	Santa Rosa Community Health Centers;
	University of California Davis; Lifelong Medical
CONNECTICUT	Community Health Center, Inc.
GEORGIA	Emory University
ILLINOIS	Erie Family Health Center, Inc.; Heartland
	International Health Centers; Cook County
INDIANA	Riggs Community Health Center, Inc.;
	University of Southern Indiana
KANSAS	Pittsburg State University; University of Kansas
	Medical Center Research Institute
MAINE	Penobscot Community Health Center
MASSACHUSETTS	University of Massachusetts Worcester
MICHIGAN	Regents of the University of Michigan

MI22I22ILLI	North Mississippi Medical Center, Inc.
NEBRASKA	University of Nebraska
NEW HAMPSHIRE	Lamprey Health Care, Inc.
NEW JERSEY	Henry Austin Health Center, Inc.;
	HMH Hospitals Corporation
NEW MEXICO	Presbyterian Healthcare Services
NEW YORK	The Institute for Family Health;
	The Mary Imogene Bassett Hospital
NORTH CAROLINA	University of North Carolina Chapel Hill
NORTH DAKOTA	North Dakota State University
OHIO	Mount Carmel Health System Foundation
PENNSYLVANIA	Allegheny-Singer Research Institute
TENNESSEE	Vanderbilt University; East Tennessee State University
WASHINGTON	Sea Mar Community Health Center;
	International Community Health Services
WISCONSIN	The Medical College of Wisconsin
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HRSA ANE-NPRIP Grant Awardees Sites

CALIFORNIA	Petaluma Health Center, Inc.; UC San Diego Health	NEW YORK	Community Healthcare Network;
CONNECTICUT	Community Health Center, Inc.		Highland Family Medicine
HAWAII	Waianae Coast Comprehensive Health Center	OHIO	Kent State University and Portage Path
ILLINOIS	OSF HealthCare	WASHINGTON	Sea Mar Community Health Center
MISSISSIPPI	North Mississippi Medical Center, Inc.		-